



DEPARTMENT OF THE NAVY
BUREAU OF MEDICINE AND SURGERY
2300 E STREET NW
WASHINGTON DC 20372-5300

IN REPLY REFER TO

BUMEDINST 6440.8A
BUMED-27
26 Jul 2001

BUMED INSTRUCTION 6440.8A

From: Chief, Bureau of Medicine and Surgery
To: Ships and Stations Having Medical Personnel

Subj: OPERATIONAL FORCES MEDICAL LIAISON SERVICES

Ref: (a) BUPERS/BUMEDINST 1306.72F

Encl: (1) Individual Sailor or Marine Survey
(2) Medical Department Representative Survey

1. Purpose. To establish functions and assign responsibilities for medical liaison support to the operational forces. This is a complete revision and must be read in it's entirety.

2. Cancellation. BUMEDINST 6440.8.

3. Scope. This instruction applies to all Claimancy 18 Medical Treatment Facilities (MTFs) that support operational forces. Operational forces are defined as deployed Fleet and Marine Forces; units of the Military Sealift Command; shore-based personnel or units subject to deployment (i.e., Navy Mobile Construction Battalion Units, Naval Special Warfare Units, Explosive Ordnance Disposal Units, Anti-Submarine Warfare Wings, Deep Submergence Units, rescue and salvage units, etc.); Army, Air Force, U.S. Coast Guard, U.S. Public Health Service, National Oceanic and Atmospheric Administration personnel or units in deployable status; and visiting foreign national personnel or units.

4. Background. The mission of Navy Medicine is to support the deployment readiness of the uniformed Services and to promote, protect, and maintain the health of those entrusted to our care anytime, anywhere. The operational forces must be provided timely access, quality care, and administrative de-confliction in a manner which supports and facilitates deployment of operational forces.

5. Responsibilities. The Operational Forces Medical Liaison Service (OFMLS) shall serve as the single point of contact and interface between the MTF and the medical department representatives (MDRs) of the operational forces. The Head, OFMLS shall be a special assistant to the MTF commander, commanding officer, or officer-in-charge. Functions of the OFMLS include, but are not limited to:

a. Provide 24-hours per day, 7 days per week point of contact between the MTF and the operational forces.

b. Coordinate timely access and health services referrals for the operational forces, in consideration of deployment schedules and operating tempos.

26 Jul 2001

c. Provide follow-up information to operational MDRs on medical evacuation patients, admissions and dispositions, and limited duty boards. Provide operational units sufficient information to initiate Personnel Casualty Reports (PCRs), unplanned loss messages, and suicide attempt or gesture messages.

d. Maintain liaison with medical holding companies established following reference (a), and report the status of operational personnel so assigned to MDRs. Notify operational commands of any significant change in the patient's status or of patient movement.

e. Provide an active, visible presence pierside and participate in local type commander (TYCOM) and MDR immediate superior in command (ISIC) medical meetings. Develop a program to identify and resolve pending medical issues with units nearing deployment date.

f. Serve as a liaison with TYCOMs, ISICs and MDRs to maintain a directory of names, locations, e-mail and telephone points of contact for operational unit MDRs.

g. Educate MDRs regarding required TRICARE procedures, and access to health care in the local region, including routine and after-hours access to the MTF for primary care, specialty care and urgent care as well as use of the network by the active duty members. Ensure MDRs understand their roles and responsibilities acting as PCMs in the local catchment area. Ensure MDRs are appropriately supported and monitored in their role as PCMs and assessments are forwarded to the TYCOM and or ISIC when appropriate. Identify point of service barriers both at the individual and system level to the commanding officer. Serve as a liaison with MDRs to provide assistance with regard to claims, network issues and benefits questions.

h. Visit emergently admitted patients from operational units within 48 hours and very seriously ill (VSI) and critically ill patients within 24 hours of their admission. Serve as liaison between the patient, the parent command, patient administration, and the personnel support activity (PSA) or personnel support detachment (PSD) if required.

i. Conduct process improvement activities:

(1) Obtain feedback from patients and MDRs using appropriate process improvement instruments. Enclosures (1) and (2) are suggested as sample instruments.

(2) Review metrics with the MTF commander, commanding officer, or officer-in-charge including whether TRICARE Prime appointment access standards are being met, consultation processing time, and MDR PCM performance.

(3) Report metrics as requested to Bureau of Medicine and Surgery, Code 02, for compilation across all Claimancy 18 MTFs.

j. Coordinate emergency logistics support to deploying or deployed operational forces.

26 Jul 2001

k. Coordinate emergency environmental health support requirements (i.e., hearing tests, asbestos screenings, potable water, and sewage treatment plant certifications, etc.) for deploying or deployed operational forces.

6. Action. MTF Commanders, Commanding Officers, and Officer-In-Charge will:

a. Establish an OFMLS.

b. Appoint the Head, OFMLS as a special assistant. The Head should be a senior medical department officer with both operational and MTF experience.

c. Establish an operational forces liaison program manager within the OFMLS. The program manager should be a senior enlisted member with operational experience.

d. Assign sufficient personnel to the OFMLS to provide adequate support to the operational forces present in the MTF area of responsibility (AOR).

e. Provide appropriate space and equipment to support operational liaison activities. Communication equipment should include, e-mail, message traffic access, and secure voice communications, where possible.


R. A. NELSON

Available at: <http://navymedicine.med.navy.mil/instructions/external/external.htm>

**OPERATIONAL FORCES MEDICAL LIAISON SERVICE CUSTOMER SURVEY
INDIVIDUAL SAILOR OR MARINE**

1. In the last 12 months, have you needed medical services outside of those available on your ship, in your squadron, or with your unit?

- ☐ Yes If yes, answer numbers 2 and 3
☐ No

2. In the last 12 months, have you experienced a problem obtaining a consult to the medical services that you needed?

- ☐ An appointment scheduled incorrectly or not quickly enough
☐ A problem with the treatment, medicine, or doctor's care
☐ No problem

3. How would you rate the care you received in the last 12 months from all doctors and other providers?

Use any number from 0 to 10 where 0 is the worst health care possible, and 10 is the best health care possible.

- ☐ 0 Worst health care possible
☐ 1
☐ 2
☐ 3
☐ 4
☐ 5
☐ 6
☐ 7
☐ 8
☐ 9
☐ 10 Best health care possible

Is there any additional information you would like to share?

Thank you for completing this survey. We plan to use your input to make improvements. If you would like a response to your answers please provide your name, telephone number and address.

**OPERATIONAL FORCES MEDICAL LIAISON SERVICE CUSTOMER SURVEY
MEDICAL DEPARTMENT REPRESENTATIVE**

1. In the last 3 months, did you call a Medical Treatment Facility's Fleet Liaison or Operational Forces Medical Liaison Service (OFMLS)?

- ☐ Yes, answer numbers 2 and 3
☐ No, skip to number 4

2. In the last 3 months, were you able to get the help you needed when you called the OFMLS during regular office hours?

- ☐ Yes
☐ Partial help (please explain)
☐ No (please explain)
☐ I didn't call for help or advice during regular office hours in the last 3 months

3. In the last 3 months, were you able to get the help you needed when you called the OFMLS outside of regular office hours?

- ☐ Yes
☐ Partial help (please explain)
☐ No (please explain)
☐ I didn't call for help or advice outside regular office hours in last 3 months

4. In the last 3 months, have you called or e-mailed your OFMLS with a complaint or problem?

- ☐ Yes, answer number 5 and 6
☐ No, skip to number 7

5. How quickly was your need or problem resolved?

- ☐ Same day
☐ 2 days
☐ 3-4 days
☐ 1 week
☐ More than 1 week
☐ I am still waiting for it to be settled. (Skip to number 7)
☐ I haven't called or written with a complaint or problem in the last 3 months.

Enclosure (2)

6. Was your complaint or problem settled to your satisfaction?

- ☐ Yes
- ☐ No, please explain
- ☐ I haven't called or written in the last 3 months.

7. How would you rate your overall experience with your OFMLS.

Use any number from 0 to 10 where 0 is the worst possible, and 10 is the best possible.

- ☐ 0 Worst OFMLS possible
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 Best OFMLS possible

8. Is there any additional information you would like to share?

Thank you for completing this survey. We plan to use this input to make improvements. If you would like a response to any of your answers please provide your name, telephone number and address.